(b) The main causes of blindness as brought out by the survey are :

	(%)
1. Cataract	80.1
2. Refractive Errors	7.35
3. Glaucoma	1.70
4. Central Corneal Opacity	1.52
5. Trachoma	0.39
6. Others	8.94

Under the National Programme for Control of Blindness, strengthening of the Opthalmic infrastructure and establishment of District Blindness Societies and Mobile Units to facilitate Eye camps has been taken up. The Financial outlays for the Centrally sponsored Blindness Control Programme have been increased substantially. The World Bank has also been approached for assistance to support the project for the control of blindness in the 7 States of the country.

Timings of C.G.H.S. Dispensaries

3946. SHRI SYED SIBTEY RAZI : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Dispensaries under CGHS have different working timings:

(b) if so, the details thereof separately for Ayurvedic, Homoeopathic and Allopathic;

(c) whether these working timings are being observed on all Saturdays:

(d) whether some services being provided to C.G.H.S. beneficiaries during 1.00 P.M. to 7.00 P.M. has since been discontinued;

(e) if so, the reasons therefor;

(f) whether Government propose to revive evening service in some selected Dispensaries grouping one to three dispensaries; and

(g) if so, the details thereof and if not, the reasons therefore ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND) : (a) Yes, Sir.

(b) **Allopathic**

7.30 A.M.to 1.30 P.M. (all dispensaries)
1.30 P.M. to 7.30 A.M. (only in functioning dispensaries)

Homoeopathic

7.30 A.M. to 1.30 P.M.

Ayurvedic

7.30 A.M. to 1.30 P.M.

(c) Yes. Sir.

(d) and (e) Afternoon services during 1.30 P.M. to 7.30 P.M. are being provided to CGHS beneficiaries in multi-shift dispensaries and the nearby single-shift dispensaries are attached to the multi-shift dispensaries for afternoon services. It was done due to change in working hours of male doctors who are doing night duties.

(f) and (e) Proposal for providing afternoon services in 42 C.G.H.S. multi-shift dispensaries by abolishing night duties is under consideration.

Purchasing of Medicine from Super Bazar by CGHS

3947. SHRI MOHAMMED AFZAL *alias* MEEM AFZAL :
SHRI RAM DEO BHANDARI :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that CGHS had been purchasing medicines from Super Bazar in bulk quantities also; if so, the reasons therefor;

(b) how much purchases were made during last five years;

(c) whether it is a fact that CGHS observed the prices charged by the Super Bazar were exorbitantly higher than the price at which these medicines are being purchased by Government Medical Supply Depot and on this account the department had stopped purchase from Super Bazar, the reasons therefor;

(d) whether it is also a fact that mostly the product or of little known company who are exempted from the Drugs Price Control Order were supplied by Super Bazar at exorbitant prices, the reasons therefor; and

(e) whether Government propose to refer such cases for further investigations by agencies, if not, the reasons thereof ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND) : (a) CGHS had been purchasing these medicines from Super Bazar as were not supplied by Medical Store Organisation.

(b) 1987-88 to 1991-92 Rs. 23,94,91,102.00 (upto December, 10, 1992).

(c) The prices charged by Super Bazar were higher as it was functioning as a retailer and not